



CALFEE, HALTER & GRISWOLD LLP

Attorney Docket No. 12873/04289

SUPPLEMENTAL DECLARATION
AND POWER OF ATTORNEY

ORIGINAL APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INWARDLY FOLDING AMBULATORY DEVICE WITH AN UPWARDLY PIVOTABLE SEAT

the specification of which

- ☐ is attached hereto.
☒ was filed on October 12, 2001, as United States Application or
PCT International Application Serial No. 09/977,122.
☐ and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s) or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplementary priority data sheet PTO/SB/02B attached hereto.					

I hereby claim on information and belief the benefit of United States priority under 35 USC §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application(s) in the manner provided by the first paragraph of 35 USC 112, I acknowledge the duty to disclose information material to the patentability of this application as defined in 37 CFR 1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

Application Serial Number	Filing Date	Legal Status

I hereby claim on information and belief the benefit of United States priority under 35 USC §119(e) of any United States provisional application(s) listed below:

Application Serial Number	Filing Date	Legal Status

I hereby appoint the following attorney(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

The Attorneys Associated with Customer No. **24024**

Direct all telephone calls to **Warren Haines** at telephone number **(216) 622-8477** and faxes to (216) 241-0816.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First inventor: John E. Owens

Inventor's signature: _____

Date: _____

Residence:

City: Elyria

State: Ohio

Country: United States

Citizenship: United States

Mailing Address: P.O. Box 712

City: Elyria State: OH Zip: 44036 Country: United States

Name of Second inventor: Robert R. Bly

Inventor's signature: Robert R. Bly

Date: 4-6-05

Residence: 20681 West Rd

City: Wellington

State: Ohio

Country: United States

Citizenship: United States

Mailing Address: 20681 West Rd

City: Wellington State: Ohio Zip: 44090 Country: United States

Name of Third inventor: Kevin S. Wysocki

Inventor's signature: Kevin S. Wysocki

Date: 4-6-05

Residence: 1001 Washington Drive

City: Grafton

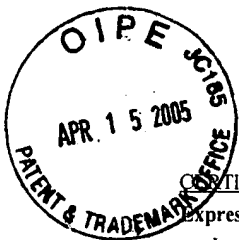
State: Ohio

Country: United States

Citizenship: United States

Mailing Address: 1001 Washington Drive

City: Grafton State: OH Zip: 44044 Country: United States



CERTIFICATE OF EXPRESS MAILING

Express Mail No.: **EL997744180US**

I certify that this correspondence is being deposited with the
United States Postal Service with sufficient postage via Express Mail;
in an envelope addressed to, Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450, on this 15th day of April, 2005.

Print Name: ROBERT WATTS

Signed: Robert Watts

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Owens)

Examiner: C. Bottorff

Serial No.: 09/977,122)

Art Unit: 3618

Filed: October 12, 2001)

For: **INWARDLY FOLDING AMBULATORY
DEVICE WITH AN UPWARDLY
PIVOTABLE SEAT**)

Attorney Docket No.: 12873/04289

Commissioner for Patents
Alexandria, VA 22313

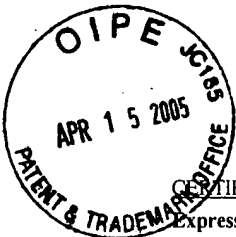
**STATEMENT OF NON-DECEPTIVE INTENT
BY PERSON BEING ADDED BY PETITION
TO CHANGE INVENTORSHIP IN PATENT**

I, the person who is being added as an inventor by the petition being submitted to correct the inventorship of this patent, do hereby declare that the inventorship error in failing to include my name as an inventor on this patent is necessitated by amendment of the claims and occurred without any deceptive intent on my part.

Robert R. Bly

Type name of inventor being added

Robert R. Bly
Signature



CERTIFICATE OF EXPRESS MAILING

Express Mail No.: **EL99774418045**

I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage via Express Mail; in an envelope addressed to, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this **15th** day of **April**, 2005.

Print Name: **ROBERT WAITS**

Signed: **Robert Waits**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Owens)

Examiner: C. Bottorff

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Alexandria, VA 22313

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TO CHANGE INVENTORSHIP IN PATENT**

I, the person who is being added as an inventor by the petition being submitted to correct the inventorship of this patent, do hereby declare that the inventorship error in failing to include my name as an inventor on this patent is necessitated by amendment of the claims and occurred without any deceptive intent on my part.

Kevin Scott Wysocki

Type name of inventor being added

Kevin Scott Wysocki
Signature



CERTIFICATE OF EXPRESS MAILING

Express Mail No. EL997744180US

I hereby certify that this communication is being deposited with the U.S. Postal Service, with sufficient postage via Express Mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313, on this 15th day of April, 2005.

ROBERT WATTS
Print Name
Robert Watts
Signed

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	:	Examiner: Bottorff, C.
Owens	:	
Serial No.: 09/977,122	:	Art Unit: 3618
Filed: October 12, 2001	:	Docket No.: 12873-04289
For: INWARDLY FOLDING AMBULATORY DEVICE WITH AN UPWARDLY PIVOTABLE SEAT	:	

**Written Consent of Assignee under 37 C.F.R. § 1.48(c)
to Correct Inventorship**

Commissioner for Patents
Alexandria, VA 22313

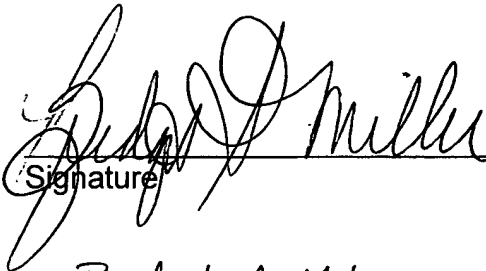
Dear Sir:

This is the written consent of Invacare Corporation, assignee of the entire, title and interest in the patent application identified above, to add Robert R. Bly and Kevin S. Wysocki as inventors.

Invacare Corporation is assignee of the entire title and interest in the patent application identified above by virtue of an assignment from the inventor(s) of the patent application. The assignment was recorded in the United States Patent and Trademark Office at Reel _012604_, Frame _0527_, or for which a copy thereof is attached.

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Respectfully submitted,

By:  Apr. 6, 2005
Signature Date

Bridget A. Miller
Printed Name

VP and General Counsel
Title



United States Patent and Trademark Office

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SUBMISSION TYPE:	NEW ASSIGNMENT										
NATURE OF CONVEYANCE:	ASSIGNMENT										
CONVEYING PARTY DATA											
<table border="1"><thead><tr><th>Name</th><th>Execution Date</th></tr></thead><tbody><tr><td>Robert R. Bly</td><td>04/06/2005</td></tr><tr><td>Kevin S. Wysocki</td><td>04/06/2005</td></tr></tbody></table>	Name	Execution Date	Robert R. Bly	04/06/2005	Kevin S. Wysocki	04/06/2005					
Name	Execution Date										
Robert R. Bly	04/06/2005										
Kevin S. Wysocki	04/06/2005										
RECEIVING PARTY DATA											
<table border="1"><tr><td>Name:</td><td>Invacare Corporation</td></tr><tr><td>Street Address:</td><td>One Invacare Way</td></tr><tr><td>City:</td><td>Elyria</td></tr><tr><td>State/Country:</td><td>OHIO</td></tr><tr><td>Postal Code:</td><td>44036</td></tr></table>	Name:	Invacare Corporation	Street Address:	One Invacare Way	City:	Elyria	State/Country:	OHIO	Postal Code:	44036	
Name:	Invacare Corporation										
Street Address:	One Invacare Way										
City:	Elyria										
State/Country:	OHIO										
Postal Code:	44036										
PROPERTY NUMBERS Total: 1											
<table border="1"><thead><tr><th>Property Type</th><th>Number</th></tr></thead><tbody><tr><td>Application Number:</td><td>09977122</td></tr></tbody></table>	Property Type	Number	Application Number:	09977122							
Property Type	Number										
Application Number:	09977122										
CORRESPONDENCE DATA											
Fax Number: (216)241-0816											
Correspondence will be sent via US Mail when the fax attempt is unsuccessful.											
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NAME OF SUBMITTER:	Warren M. Haines II
Signature:	/whaines/
Date:	04/15/2005
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